(घ) यदि हां, तो इस संबंध में सरकार द्वारा क्या कार्यवाही की जा रही है ?

[illegible] में राज्य वार (ब्यौरा दर्शाए)

(क) से (घ) कुछ बड़े शहरों में फास्ट फूड बेचने वाले प्रतिष्ठानों की संख्या बढ़ती जा रही है । संयुक्त खाद्य और कृषि संगठन, विश्व स्वास्थ्य संगठन, खाद्य सुरक्षा संबंधी विशेषज्ञ समिति की रिपोर्ट के अनुसार आर्थिक पहलुओं और रोजगार पैटर्न के परिणामस्वरूप फास्ट फूड की खपत में वृद्धि हुई है । चूंकि फास्ट फूड आमतौर पर उसी समय खा लिया जाता है अथवा घर पर तत्काल खाने के लिए ले जाया जाता है, इसलिए उस पर "अन्तिम तारीख" का उल्लेख करने का प्रश्न नहीं उठता ।

राज्यों/संघ राज्य क्षेत्रों के खाद्य (स्वास्थ्य) अधिकारियों को समय-समय पर यह सलाह दी जाती है कि खाद्य पदार्थों, फास्ट फूड सहित, की गुणवत्ता सुनिश्चित [illegible] जाए ।

Cost escalation in Ace Atomic Power Stations

[illegible] BHARATI SATYA BAHINA:
KUMARI SUSHILA TIRIA:

Will the PRIME MINISTER be pleased to state:

(a) what had been the cost escalation of Madras, Narora and Kota Atomic Power Stations set up during the last ten years and the reasons therefor; and

(b) what was its impact on the cost of power generation?

THE MINISTER OF STATE IN THE MINISTRY OF SCIENCE AND TECHNOLOGY AND THE MINISTER OF STATE IN THE DEPARTMENTS OF OCEAN DEVELOPMENT, ATOMIC ENERGY, SPACE AND ELECTRONICS (SHRI K. R. NARAYANAN): (a) The [illegible] sanctioned costs and latest anticipated/approved cost in respect of Unit-2 of Rajasthan Atomic Power Station (RAPS-2), Madras Atomic Power Station (MAPS-1&2) and Narora Atomic Power (NAPP-1&2) are as follows:—

(Rs. in crores)

	Original approved cost estimate	Latest sanctioned estimated cost
RAPS—2 . .	58.16	102.54
MAPS—1 . .	61.78	118.83
MAPS—2 . .	70.63	127.04
MAPP—1&2 . .	209.89	532.85 (Under approval)

The increase in costs is attributable to escalation due to stretch in schedule, design changes and improvements due to evolving safety standards and technology and increases in statutory levies and foreign exchange rate fluctuations.

[illegible] increase in cost of power generation on account of increase in capital cost is approximately [illegible] paise/kwh.

[illegible] aided scheme to treat cancer

SHRI R. VELAYANCHELI SIVAJI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the details of the centrally aided schemes in different States to treat cancer; and

(b) what are the details of the proposals at present under Government's consideration in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Under the Cancer Control Programme, Central assistance is provided for the following:—

(i) To Regional Cancer Research & Treatment Centres located at Ahmedabad, Bangalore, Calcutta, Cuttack, Delhi, Gwalior, Guwahati, Madras and Trivendrum for the purchase of sophisticated equipments;

(ii) To Government and non-Government institutions engaged in provision of cancer treatment for the purchase of cobalt therapy units at the rate of Rs. 12.00 lakhs;

(iii) For setting up of Pap Smear Testing units under the Post Partum Programme in the Medical Colleges.

(b) Proposals given for Cancer Control Programme during the 8th Plan are being examined. They will be formulated on the basis of the recommendations of the Second Conference of Central Council of Health & Family Welfare held in February, 1989. The Conference had recommended:

(i) To conduct an evaluation of the Regional Cancer Centres and thereafter assess the requirements of funds;

(ii) To strengthen medical colleges in States which do not have Regional Centres for providing treatment facilities;

(iii) Developing Oncology wing in at least 50 per cent of the medical colleges during the 8th Plan for management of cancer cases and developing outreach programmes for early detection of cancer;

(iv) Training of medical, para-medical personnel and technicians at the Regional Cancer Centres/Medical Colleges;

(v) Integration of Cancer Control with existing health care programmes.

Extension of immunisation programme in the Villages

*209. SHRI SURENDRA SINGH THAKUR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have decided to extend the benefits of Immunisation programme to the rural areas through the Primary Health Centres and the mobile health care units;

(b) if so, what are the details thereof;

(c) whether Government propose to make the P.H.Cs as the Centres for immunisation facilities; and

(d) if so, by when?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir. Immunization Programme is already being implemented in rural areas through primary health centres, health sub-centres and out-reach services.

(b) Immunization services are provided up to village level on days which are publicized in advance.

(c) and (d) Primary Health Centres have been equipped with cold chain equipments like Refrigerators, deep freezers and other equipments like auto claves, syringes, needles etc. in more than 300 districts. Primary Health Centres of remaining districts are being supplied with the required equipments during the current year.

Reimbursement of cost to industries developing equipment for defence

*210. SHRI KAMAL MORARKA:
SHRI YASHWANT SINHA:

Will the Minister of DEFENCE be pleased to state:

(a) whether specific conditions have been recently imposed by the Ministry of Defence to govern the scheme for reimbursing to the industries the cost incurred